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**\*BIBDATASHEET\*****CONFIRMATION NO. 7458**

Bib Data Sheet

SERIAL NUMBER 09/752,253	FILING DATE 12/30/2000  RULE	CLASS 711	GROUP ART UNIT 2188	ATTORNEY DOCKET NO. 00-063-DSK
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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE****GRANTED****\*\* 06/28/2001**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR  COUNTRY CO	SHEETS  DRAWING 5	TOTAL  CLAIMS 12	INDEPENDENT  CLAIMS 2
Examiner's Signature _____ Initials _____					

**ADDRESS**

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**TITLE**

Recovery of dynamic maps and data managed thereby

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )